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**** CONTINUING DATA *******

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**** FOREIGN APPLICATIONS *******

GERMANY 102 29 103.9 06/25/2002

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

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Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance PAH Initials	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		AUSTRIA	2	16	2

ADDRESS

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TITLE

Thermal water treatment device and method

FILING FEE RECEIVED 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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